

	Class
	Subclass

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			7/10/00
O.I.P.E. CLASSIFIER	IWP	8	7/11/00
FORMALITY REVIEW	2A	JCS 583	08/22/00
RESPONSE FORMALITY REVIEW	8C	71470	2/3/01

**INDEX OF CLAIMS**

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	101	102
Final	✓	
Original	✓	
1	✓	
2	✓	
3	✓	
4	✓	
5	✓	
6	✓	
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Claim	Date
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Claim	Date
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**BEST AVAILABLE COPY**

If more than 150 claims or 10 actions  
staple additional sheet here